



## MUTE SWAN REMOVAL

## **PETITION**

Under authority of Act 451 of PA of 1994 as amended

We the undersigned,	are riparian (waterfror	nt) lot owners on		_ Lake in
	City/Township	o. We request a permit	from the Michigan Dep	artment
Natural Resources, W	/ildlife Division, to cap	ture/hold and euthanize	mute swans on our la	ke/site.
We understand that the	ne mute swans will be	euthanized. These sign	natures will be good fo	r a period
of five (5) years, but v	ve understand that we	must apply annually for	r this program.	
SIGNATURE		ADDRESS		
I hereby certify and su	wear that the names o	on this petition and all at ers on	tachments represent a ।	t least .ake.
corony poroon (1076	,, o. alo lanonom own	o.o on	<b>-</b>	.a.r.o.
Name (print)	Signature	Date	( ) Telephone	